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PTO/SB/01 (10-00)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.15(e)) required)	Attorney Docket Number	DEP 5305USPCT
	First Named Inventor	REVIE
	COMPLETE IF KNOWN	
	Application Number	10/598,626
	Filing Date	09/06/2006
	Group Art Unit	TBD
	Examiner Name	TBD

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ORTHOPAEDIC OPERATING SYSTEMS, METHODS, IMPLANTS AND INSTRUMENTS  
(Title of the Invention)

the specification of which

☐ is attached hereto  
OR

☒ was filed on (03/10/2005) as PCT International Application Number  
PCT/GB05/00933 and was amended on (MM/DD/YYYY) ☐

REVIEWED THE CONTENTS OF THE APPLICATION  
IN MARCH 2005 AND HAVE NOT REVIEWED SINCE  
THAT DATE. AT THAT REVIEW, UNDERSTOOD  
THE CONTENTS OF THE  
IDENTIFIED SPECIFICATION

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

3RD AUG-  
2007

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

# DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** ...

Place Customer  
Number Bar Code  
Label Here

AND

☐ Practitioner(s) named below:  
Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Brian S. Tomko at telephone number (732) 524-1239.

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

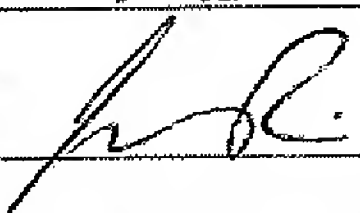
ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) IAN		Family Name or Surname REVIE	
Inventor's Signature 		Date 3RD AUGUST 2007	
Residence: City Boroughbridge		State North Yorkshire	Citizenship UK

Mailing Address Tutt House, New Row

City Boroughbridge	State	ZIP YO51 9AX	Country UK
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<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ALAN		Family Name or Surname ASHBY	
Inventor's Signature		Date	
Residence: City York	State North Yorkshire	Country UK	Citizenship UK

Mailing Address 19 Clifton Green

City York	State North Yorkshire	ZIP YO30 6LN	Country UK
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<b>NAME OF THIRD INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) THORSTEN		Family Name or Surname BURGER	
Inventor's Signature		Date	
Residence: City Muenchen	State	Country Germany	Citizenship German
Mailing Address Speyerstr. 8			
City Muenchen	State	ZIP 80804	Country Germany



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>NAME OF SOLE OR FOURTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) STEFAN		<b>Family Name</b> or Surname VILSMEIER	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Kufstein	<b>State</b>	<b>Country</b> Austria	<b>Citizenship</b> GERMAN
<b>Mailing Address</b> Oberer Stadtplatz 6			
<b>City</b> Kufstein	<b>State</b>	<b>ZIP</b> 6330	<b>Country</b> Austria
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF FIFTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) ASSAF		<b>Family Name</b> or Surname GOVARI	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Haifa	<b>State</b>	<b>Country</b> Israel	<b>Citizenship</b> Israel
<b>Mailing Address</b> Vitzo 1			
<b>City</b> Haifa	<b>State</b>	<b>ZIP</b>	<b>Country</b> Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SIXTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) DUDI		<b>Family Name</b> or Surname REZNICK	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Shimshit	<b>State</b>	<b>Country</b> Israel	<b>Citizenship</b> Israel
<b>Mailing Address</b> Peleg 33 st.			
<b>City</b> Shimshit	<b>State</b>	<b>ZIP</b> POB: 17906	<b>Country</b> Israel

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<b>NAME OF SEVENTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) PESACH		<b>Family Name</b> or Surname SUSEL	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Haifa	<b>State</b>	<b>Country</b> Israel	<b>Citizenship</b> Israel
<b>Mailing Address</b> 43 Varida St.			
<b>City</b> Haifa	<b>State</b>	<b>ZIP</b>	<b>Country</b> Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF EIGHTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any]) AVI		<b>Family Name</b> or Surname SHALGI	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> Tel Aviv	<b>State</b>	<b>Country</b> Israel	<b>Citizenship</b> Israel
<b>Mailing Address</b> Kashani 3 <sup>rd</sup> st., Ramat Aviv Gimel			
<b>City</b> Tel Aviv	<b>State</b>	<b>ZIP</b> 69499	<b>Country</b> Israel

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	DEP 5305USPCT	
<input type="checkbox"/> Declaration Submitted with Initial Filing  <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)  OR		First Named Inventor	REVIE	
		COMPLETE IF KNOWN		
		Application Number	10/598,626	
		Filing Date	09/06/2006	
		Group Art Unit	TBD	
		Examiner Name	TBD	
As a below named inventor, I hereby declare that:  My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
ORTHOPAEDIC OPERATING SYSTEMS, METHODS, IMPLANTS AND INSTRUMENTS (Title of the Invention)				
the specification of which  <input type="checkbox"/> is attached hereto OR  <input checked="" type="checkbox"/> was filed on (03/10/2005) as PCT International Application Number PCT/GB05/00933 and was amended on (MM/DD/YYYY) <input type="text"/>				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
Application Serial No.	Filing Date	Status
		Patented Patented Patented
I hereby appoint: <div style="float: right; text-align: right;">             Place Customer              Number Bar Code              Label Here           </div> <div style="clear: both;"></div> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 2px 10px;">000027777</span> </div> <div style="width: 35%; text-align: center;">             AND           </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div style="width: 60%;"> <input type="checkbox"/> Practitioner(s) named below:  <u>Name</u> </div> <div style="width: 35%; text-align: center;"> <u>Registration Number</u> </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to Brian S. Tomko at telephone number (732) 524-1239.		
Direct all correspondence to: <div style="display: flex; align-items: center; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Customer Number  <input checked="" type="checkbox"/> or Bar Code Label             </div> <div style="border: 1px solid black; padding: 2px 10px;">000027777</div> <div>             OR             <input type="checkbox"/> Correspondence address below           </div> </div>		
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:




I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) IAN		Family Name or Surname REVIE	
Inventor's Signature		Date	
Residence: City Boroughbridge	State North Yorkshire	Country UK	Citizenship UK

Mailing Address Tutt House, New Row

City Boroughbridge	State	ZIP YO51 9AX	Country UK
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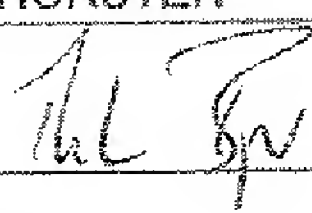
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ALAN		Family Name or Surname ASHBY	
Inventor's Signature 		Date 14 August 2007	
Residence: City York	State North Yorkshire	Country UK	Citizenship UK

Mailing Address 19 Clifton Green

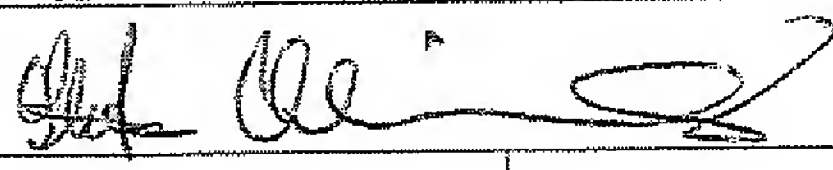
City York	State North Yorkshire	ZIP YO30 6LN	Country UK
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) THORSTEN		Family Name or Surname BURGER	
Inventor's Signature 		Date July 18, 2007	
Residence: City Muenchen	State	Country Germany	Citizenship German
Mailing Address Speyerstr. 8			
City Muenchen	State	ZIP 80804	Country Germany



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) STEFAN		Family Name or Surname VILSMEIER	
Inventor's Signature 		Date	
Residence: City Kufstein	State	Country Austria	Citizenship GERMAN
Mailing Address Oberer Stadtplatz 6			
City Kufstein	State	ZIP 6330	Country Austria
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ASSAF		Family Name or Surname GOVARI	
Inventor's Signature		Date	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address Vitzo 1			
City Haifa	State	ZIP	Country Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) DUDI		Family Name or Surname REZNICK	
Inventor's Signature		Date	
Residence: City Shimshit	State	Country Israel	Citizenship Israel
Mailing Address Peleg 33 st.			
City Shimshit	State	ZIP POB: 17906	Country Israel

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NAME OF SOLE OR FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) STEFAN		Family Name or Surname VILSMEIER	
Inventor's Signature		Date	
Residence: City Kufstein	State	Country Austria	Citizenship GERMAN
Mailing Address Oberer Stadtplatz 6			
City Kufstein	State	ZIP 6330	Country Austria
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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ASSAF		Family Name or Surname GOVARI	
Inventor's Signature <i>A.G.</i>		Date <i>A.G.</i> 18/09/07	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address Vitzo 1			
City Haifa	State	ZIP	Country Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) DUDI		Family Name or Surname REZNICK	
Inventor's Signature		Date	
Residence: City Shimshit	State	Country Israel	Citizenship Israel
Mailing Address Peleg 33 st.			
City Shimshit	State	ZIP POB: 17906	Country Israel



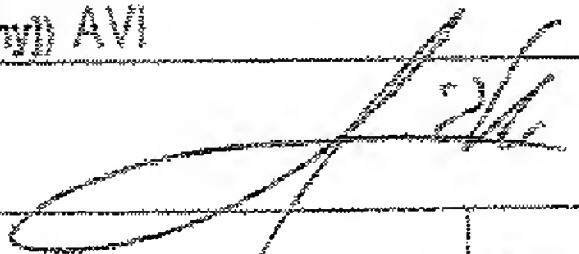
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NAME OF SOLE OR FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) STEFAN		Family Name or Surname VILSMEIER	
Inventor's Signature		Date	
Residence: City Kufstein	State	Country Austria	Citizenship GERMAN
Mailing Address Oberer Stadtplatz 6			
City Kufstein	State	ZIP 6330	Country Austria
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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) ASSAF		Family Name or Surname GOVARI	
Inventor's Signature		Date	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address Vilzo 1			
City Haifa	State	ZIP	Country Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) DUDI		Family Name or Surname REZNICK	
Inventor's Signature		Date 23/7/07	
Residence: City Shmshit	State	Country Israel	Citizenship Israel
Mailing Address Peleg 33 st.			
City Shmshit	State	ZIP POB: 17906	Country Israel



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NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) PESACH		Family Name or Surname SUSEL	
Inventor's Signature <i>P. SUSEL</i>		Date 18/09/2007	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address 43 Varida St.			
City Haifa	State	ZIP	Country Israel
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NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) AVI		Family Name or Surname SHALGI	
Inventor's Signature		Date	
Residence: City Tel Aviv	State	Country Israel	Citizenship Israel
Mailing Address Kashani 3 <sup>rd</sup> st., Ramat Aviv Gimel			
City Tel Aviv	State	ZIP 69499	Country Israel

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) PESACH		Family Name or Surname SUSEL	
Inventor's Signature		Date	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address 43 Varida St.			
City Haifa	State	ZIP	Country Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) AVI		Family Name or Surname SHALGI	
Inventor's Signature 		Date Sep 13, 2007	
Residence: City Tel Aviv	State	Country Israel	Citizenship Israel
Mailing Address 32 Shlomo Ben-Yosef st., Ramat Aviv Gimel			
City Tel Aviv	State	ZIP 69125	Country Israel